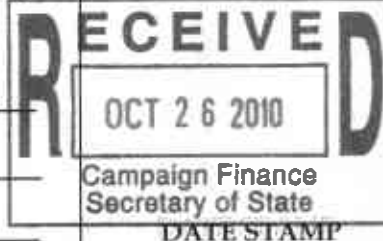


Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
2010 Judicial Election

Name of Committee Committee to Elect Bill Evers JudgeAddress Box 644 Clinton, Ms. 39056Telephone 601-373-5000Fax 601 372 9405Treasurer Dick WithersEmail dwithers@withers-law.com

Check here if above is different from previous report

TYPE OF REPORT

- ☐ May 10, 2010 Periodic Report (January 1, 2010, through April 30, 2010).....Mandatory
- ☐ June 10, 2010 Periodic Report (May 1, 2010, through May 31, 2010).....Mandatory
- ☐ July 9, 2010 Periodic Report (June 1, 2010, through June 30, 2010).....Mandatory
- ☐ October 8, 2010 Periodic Report (July 1, 2010, through September 30, 2010).....Mandatory
- ☒ October 26, 2010 Pre-Election Report (October 1, 2010, through October 23, 2010).....Mandatory
- ☐ November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).....Runoff Candidates
- ☐ January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010).....Mandatory
- ☐ Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) Required to terminate reporting obligations

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized + Non-itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	\$5553 ³⁰ + \$3,400 ⁰⁰	\$8,953 ³⁰	\$68,932 ³⁰
Total amount of disbursements	\$45916 ⁴²	\$45916 ⁴³	\$61,584 ⁹⁴
Total amount of cash on hand		\$7,347 ³⁶	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Signature of Director or Treasurer

Date

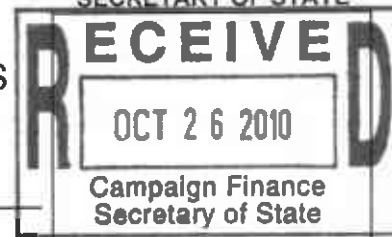
Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39205 or fax to 601-359-1499 or 601-576-2819.

2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Judicial Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2010 Judicial Election



Name of Candidate William "Bill" Gowan
 Address Box 644 Clinton, MS County Hinds
 Telephone Work 601-260-5399 Home 601-948-8069 Fax _____
 Contact Name Dick Withers Email Address DWithers@WithersForest.com
 Office Sought Cir Judge 7th Dist 4th Sub District

☐ Check here if above is different from previous report

____ May 10, 2010 Periodic Report (January 1, 2010, through April 30, 2010).....Mandatory
 ____ June 10, 2010 Periodic Report (May 1, 2010, through May 31, 2010).....Mandatory
 ____ July 9, 2010 Periodic Report (June 1, 2010, through June 30, 2010).....Mandatory
 ____ October 10, 2010 Periodic Report (July 1, 2010, through September 30, 2010).....Mandatory
 ✓ ____ October 26, 2010 Pre-Election Report (October 1, 2010, through October 23, 2010).....Mandatory
 ____ November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).....Runoff Candidates
 ____ January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010).....Mandatory
 ____ Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) Required to terminate reporting obligations

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized + Non-Itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	\$5553 ³⁰ + \$3400	\$8953 ³⁰	\$68932 ³⁰
Total amount of disbursements	\$45916 ⁴³ + \$ —	\$45916 ⁴³	\$61584 ⁹⁴
Total amount of cash on hand		\$7347 ³⁶	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

William "Bill" Gowan
Signature of Candidate

10/26/10
Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39205 or fax to 601-359-1499 or 601-676-2819.
 2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Name of Candidate or Committee William Gowan
 Reporting period Oct 1 through Oct. 23-2010

ITEMIZED RECEIPTS

A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Mid South Trading Co. Inc.</u>		<u>10/4/10</u>	\$ <u>500</u>
Mailing Address <u>Bx 5373</u>		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code <u>Jackson, Ms.</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required) _____		<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required) <u>oil investments</u>		Aggregate year-to-date	\$ <u>500</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Charles Bullock</u>		<u>10/5/10</u>	\$ <u>500⁰⁰</u>
Mailing Address <u>421 Reynolds Rd.</u>		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code <u>Clinton Ms 39056</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required) <u>Hinds County</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required) <u>training officer</u>		Aggregate year-to-date	\$ <u>500⁰⁰</u>
C. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>King & Spamer Attys</u>		<u>10/9/10</u>	\$ <u>250</u>
Mailing Address <u>Box 123</u>		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code <u>Jackson, Ms. 39205</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required) <u>Self.</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ <u>250</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Christie E. Ogden</u>		<u>10/13/10</u>	\$ <u>1000⁰⁰</u>
Mailing Address <u>1700 Sheffield Dr.</u>		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code <u>Jackson Ms.</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required) <u>Don Evans</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required) <u>para legal</u>		Aggregate year-to-date	\$ <u>1,000⁰⁰</u>

Name of Candidate or Committee William Brown
 Reporting period Oct. 1 through Oct. 23, 2010

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Ray H. Parker</u>		<u>10/14/10</u>	\$ <u>500⁰⁰</u>
Mailing Address <u>2820 Yarrow Creek Rd.</u>		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code <u>Belton, Ms 39041</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required) <u>Self</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required) <u>Investments</u>		Aggregate year-to-date	\$ <u>500⁰⁰</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Ronald L. Smith</u>		<u>10/14/10</u>	\$ <u>300⁰⁰</u>
Mailing Address <u>801 E. Fortification St.</u>		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code <u>Jackson, Ms. 39202</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required) <u>Self</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ <u>300⁰⁰</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Chad Mack</u>		<u>10/15/10</u>	\$ <u>250⁰⁰</u>
Mailing Address <u>1110 Poplar Blvd</u>		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code <u>Jackson, Ms.</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required) <u>Self</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ <u>250⁰⁰</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Kenneth Odinet, M.D.</u>		<u>10/15/10</u>	\$ <u>250⁰⁰</u>
Mailing Address <u>501 W. St Mary Blvd Ste 514</u>		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code <u>Lafayette, La 70506</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required) <u>Self</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required) <u>Doctor</u>		Aggregate year-to-date	\$ <u>250⁰⁰</u>

Name of Candidate or Committee _____

Reporting period _____ through _____

ITEMIZED RECEIPTS

A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: <u>Turnbow Properties, Inc.</u>	<u>10/18/10</u>	\$ <u>500⁰⁰</u>
Mailing Address: <u>1012 University #02.</u>	<u> </u> <u> </u> <u> </u>	\$
City, State, Zip Code: <u>Oxford, Ms. 38655.</u>	<u> </u> <u> </u> <u> </u>	\$
Name of Employer (Required): <u>Self</u>	<u> </u> <u> </u> <u> </u>	\$
Occupation (Required): <u>Real Estate Investments</u>	Aggregate year-to-date	\$ <u>500⁰⁰</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: <u>Thomas G. Hixon</u>	<u>10/21/10</u>	\$ <u>1,000</u>
Mailing Address: <u>149 Woodmont Way</u>	<u> </u> <u> </u> <u> </u>	\$
City, State, Zip Code: <u>Ridgeland, Ms. 39157</u>	<u> </u> <u> </u> <u> </u>	\$
Name of Employer (Required): <u>Self</u>	<u> </u> <u> </u> <u> </u>	\$
Occupation (Required): <u>Investments</u>	Aggregate year-to-date	\$ <u>1,000⁰⁰</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: <u>William B. Kirksey</u>	<u>10/21/10</u>	\$ <u>300⁰⁰</u>
Mailing Address: <u>Box 33</u>	<u> </u> <u> </u> <u> </u>	\$
City, State, Zip Code: <u>Jackson, Ms. 39205</u>	<u> </u> <u> </u> <u> </u>	\$
Name of Employer (Required): <u>Self</u>	<u> </u> <u> </u> <u> </u>	\$
Occupation (Required): <u>Attorney</u>	Aggregate year-to-date	\$ <u>300⁰⁰</u>
D. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: <u>Milner & Nixon PLLC</u>	<u>10/22/10</u>	\$ <u>203³⁰</u>
Mailing Address: <u>Box 2256</u>	<u> </u> <u> </u> <u> </u>	\$
City, State, Zip Code: <u>Clinton, Ms. 39060</u>	<u> </u> <u> </u> <u> </u>	\$
Name of Employer (Required): <u>Self</u>	<u> </u> <u> </u> <u> </u>	\$
Occupation (Required): <u>Attorney</u>	Aggregate year-to-date	\$ <u>203³⁰</u>

Name of Candidate or Committee _____

Reporting period _____ through _____

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>R. Corina McAllister</u>	<u>10/22/10</u>	\$ <u>200⁰⁰</u>
Mailing Address _____	<u> / / </u>	\$
City, State, Zip Code <u>76025</u>	<u> / / </u>	\$
Name of Employer (Required) <u>Self</u>	<u> / / </u>	\$
Occupation (Required) <u>Attorney</u>	Aggregate year-to-date	\$ <u>458⁰⁰</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____	<u> / / </u>	\$
Mailing Address _____	<u> / / </u>	\$
City, State, Zip Code _____	<u> / / </u>	\$
Name of Employer (Required) _____	<u> / / </u>	\$
Occupation (Required) _____	Aggregate year-to-date	\$
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____	<u> / / </u>	\$
Mailing Address _____	<u> / / </u>	\$
City, State, Zip Code _____	<u> / / </u>	\$
Name of Employer (Required) _____	<u> / / </u>	\$
Occupation (Required) _____	Aggregate year-to-date	\$
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____	<u> / / </u>	\$
Mailing Address _____	<u> / / </u>	\$
City, State, Zip Code _____	<u> / / </u>	\$
Name of Employer (Required) _____	<u> / / </u>	\$
Occupation (Required) _____	Aggregate year-to-date	\$

600330

Name of Candidate or Committee William GowanReporting period 10-1-2010 through 10-23-10

ITEMIZED DISBURSEMENTS

A. Full name <u>Steve Pickett aka Pickett Printing</u>	Date (Mo., Day, Year) <u>10/1/10</u>	Amount of each disbursement this period \$ <u>500⁰⁰</u>
Mailing Address <u>3685 McFarland Rd.</u>	<u>10/1/10</u>	\$ <u>500⁰⁰</u>
City, State, Zip Code <u>Raymond, Ms.</u>	<u>10/8/10</u>	\$ <u>500⁰⁰</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>10/14/10</u>	\$ <u>165⁵⁷</u>
City, State, Zip Code	<u>10/19/10</u>	\$ <u>500⁰⁰</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>10/19/10</u>	\$ <u>450⁰⁰</u>
City, State, Zip Code	<u>10/21/10</u>	\$ <u>500⁰⁰</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>7443⁷²</u>
D. Full name <u>Roger</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>155 North</u>	<u>10/1/10</u>	\$ <u>135⁹³</u>
City, State, Zip Code <u>Jackson, Ms. 39211</u>	<u>10/1/10</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>135⁹³</u>
E. Full name <u>Byram Banner</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>5032 Terry Rd.</u>	<u>10/1/10</u>	\$ <u>210⁰⁰</u>
City, State, Zip Code <u>Byram, Ms. 39212</u>	<u>10/1/10</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>345⁰⁰</u>
F. Full name <u>Trish Flog</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>Springridge Rd.</u>	<u>10/5/10</u>	\$ <u>237⁵⁰</u>
City, State, Zip Code <u>Clinton, Ms. 39056</u>	<u>10/5/10</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>237⁵⁰</u>

Name of Candidate or Committee William Egan
 Reporting period 10-1-10 through 10-23-10

ITEMIZED DISBURSEMENTS

A. Full name <u>Coffee News.</u>	Date (Mo., Day, Year) <u>10/6/10</u>	Amount of each disbursement this period \$ <u>250⁰⁰</u>
Mailing Address <u>Clinton, Ms. 39056</u>	<u>10/6/10</u>	\$ <u>250⁰⁰</u>
City, State, Zip Code <u>Clinton, Ms. 39056</u>	<u>10/6/10</u>	\$ <u>250⁰⁰</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>250⁰⁰</u>
B. Full name <u>Fernandez Creative</u>	Date (Mo., Day, Year) <u>10/12/10</u>	Amount of each disbursement this period \$ <u>415⁰⁰</u>
Mailing Address <u>200 Commerce St.</u>	<u>10/12/10</u>	\$ <u>415⁰⁰</u>
City, State, Zip Code <u>Jackson, Ms. 39205</u>	<u>10/12/10</u>	\$ <u>415⁰⁰</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>415⁰⁰</u>
C. Full name <u>Lamar Outdoor Signs</u>	Date (Mo., Day, Year) <u>10/12/10</u>	Amount of each disbursement this period \$ <u>1800⁰⁰</u>
Mailing Address <u>405 Country Place Parkway</u>	<u>10/12/10</u>	\$ <u>1800⁰⁰</u>
City, State, Zip Code <u>Jackson, Ms. 39208</u>	<u>10/12/10</u>	\$ <u>1800⁰⁰</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>6547⁰⁰</u>
D. Full name <u>WLBT</u>	Date (Mo., Day, Year) <u>10/18/10</u>	Amount of each disbursement this period \$ <u>11,360²⁹</u>
Mailing Address <u>715 Kippoon St.</u>	<u>10/18/10</u>	\$ <u>11,360²⁹</u>
City, State, Zip Code <u>Jackson, Ms.</u>	<u>10/20/10</u>	\$ <u>728²¹</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>12088⁵⁰</u>
E. Full name <u>Comcast</u>	Date (Mo., Day, Year) <u>10/18/10</u>	Amount of each disbursement this period \$ <u>7,316⁸⁰</u>
Mailing Address <u>ISS Inotage Rd.</u>	<u>10/18/10</u>	\$ <u>7,316⁸⁰</u>
City, State, Zip Code <u>Jackson, Ms. 39211</u>	<u>10/18/10</u>	\$ <u>7,316⁸⁰</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>7316⁸⁰</u>
F. Full name <u>USPS</u>	Date (Mo., Day, Year) <u>10/19/10</u>	Amount of each disbursement this period \$ <u>1000⁰⁰</u>
Mailing Address <u>Jackson, Ms.</u>	<u>10/19/10</u>	\$ <u>1000⁰⁰</u>
City, State, Zip Code <u>Jackson, Ms.</u>	<u>10/21/10</u>	\$ <u>222⁰⁰</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>3022⁰⁰</u>

Name of Candidate or Committee William Owen
 Reporting period 10-1-10 through 10-23-10

ITEMIZED DISBURSEMENTS

A. Full name <u>Clear Channel Broadcasting</u>	Date (Mo., Day, Year) <u>10/21/10</u>	Amount of each disbursement this period \$ <u>5,488.45</u>
Mailing Address <u>1375 Beasley Rd.</u>	<u>10/21/10</u>	\$ <u>5,488.45</u>
City, State, Zip Code <u>Jackson, Ms. 39214</u>	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>5,488.45</u>
B. Full name <u>Clarion Ledger</u>	Date (Mo., Day, Year) <u>10/22/10</u>	Amount of each disbursement this period \$ <u>450.00</u>
Mailing Address <u>201 S. Congress St.</u>	<u>10/22/10</u>	\$ <u>450.00</u>
City, State, Zip Code <u>Jackson, Ms. 39201</u>	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>450.00</u>
C. Full name <u>WAPT</u>	Date (Mo., Day, Year) <u>10/22/10</u>	Amount of each disbursement this period \$ <u>6,141.25</u>
Mailing Address <u>7616 Channel 16 Way</u>	<u>10/22/10</u>	\$ <u>6,141.25</u>
City, State, Zip Code <u>Jackson, Ms.</u>	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>6,141.25</u>
D. Full name <u>WSTV</u>	Date (Mo., Day, Year) <u>10/22/10</u>	Amount of each disbursement this period \$ <u>5,746.00</u>
Mailing Address <u>1820 TV Road</u>	<u>10/22/10</u>	\$ <u>5,746.00</u>
City, State, Zip Code <u>Jackson, Ms.</u>	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>5,746.00</u>
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$